## FERMI RESEARCH ALLIANCE, LLC (FRA)

## **DISCLOSURE FORM**

1.	Are you an owner, partner, dire seeks to do business with FRA	an owner, partner, director, or officer of any business that supplies, or do business with FRA?	
	YES	NO	
2.	Are you engaged in any outside to do business with FRA?	e activity for any organization that supplies, or seeks	
	YES	NO	
3.	To the best of your knowledge and belief, do you or any member of your immediate family (spouse, partner, child, parent, or sibling) have any financial interest in any business enterprise that supplies or seeks to do business with FRA? [This does not include investments that are part of pensions, mutual funds, annuities, and similar financial investment instruments that is considered widely diversified when the shares in the business in question constitute no more than five percent of the value of the protfolio.]		
	YES	NO	
4.	Do you know of any other appearance of potential conflict or personal conflict of interests under FRA's policy involving you or your immediate family?		
	YES	NO	
	on the reverse side of this form	f these questions, please describe and/or give details . Use an additional sheet if necessary.	
	e best of my knowledge, this Disc s out of which potential personal	closure identifies all of my interactions with third conflicts of interest may arise.	
of my the po neces	knowledge, I have answered the olicy on Conflict of Interest, I und	finition and policy on Conflicts of Interest. To the best e above questions correctly. If there is a breach of erstand that FRA may take such action as may be re is a change in my situation at any time, I will file an re.	
Print	Your Name:		
Signa	ature of Employee:		
I.D. #	:	Date:	